

In fact, black women bear an unsustainable burden of this disease. Their infection rate is 20 times that of white women. In Washington alone, black women are 64% of the population but constitute 90% of women living with HIV. In Palm Beach County, FL, black women constitute 75% of new HIV infections but only 60% of HIV-positive women were seeing a doctor.

Obviously, precarious social existences and circumstances combined with fear and embarrassment prevent proper medical intervention and facilitate the spread among women—black women most prominently—and others. Meanwhile, after record increases in AIDS vaccine research in the last decade, only half-a-percent increases are expected for the next few years for the federal HIV/AIDS budget.

## REFERENCE

1. Over 1 Million HIV Positive People Living in USA; Nearly Half Are African American, CDC Says.

www.medicalnewstoday.com. Accessed 06/15/05.

2. Fears D. U.S. HIV Cases Soaring among Black Women. *The Washington Post*. February 7, 2005. P. A1.

3. Blacks Least Likely to Get among HIV-Positive People in Palm Beach County, FL to Seek Treatment, Says Study. www.medicalnewstoday.com. Accessed 04/22/05.

## Infectious Disease among Katrina Evacuees and Workers

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On September 13, the CDC presented a teleconference to provide clinicians with information about infectious diseases likely to be encountered among Hurricane Katrina evacuees and rescue workers.

Because evacuees have been exposed to potentially contaminated water, may have been injured and are or have been living in crowded conditions possibly involving poor hygiene, they are at risk for infectious diseases, such as those listed in the chart below. Dr. Todd Weber of the CDC Katrina response team

emphasized that good handwashing is extraordinarily important to prevent the spread of disease, especially diarrheal diseases and conjunctivitis. CDC recommendations for vaccination of evacuees are the same as for the general population. However, influenza vaccination guidelines may be changed due to Katrina as the season progresses. They recommend that healthcare workers be up-to-date on hepatitis B and tetanus immunizations.

The CDC provides more information for clinicians on its website (www.cdc.gov), and NIH offers a 24/7 hotline (866-887-2842) for physicians desiring consultation about Katrina evacuees or workers with infections or other problems.

## REFERENCE

"Hurricane Relevant Issues," CDC—COCA Teleconference, Accessed 09/13/05.

CDC website, Hurricane Katrina page, www.bt.cdc.gov/disasters/hurricanes/index.asp.

Disease Category	Agents	Additional Information
Diarrheal diseases	<i>Salmonella</i> <i>Shigella</i>  <i>Campylobacter</i> Viral agents including Noroviruses	Although antibiotics are usually not indicated for <i>Shigella</i> infections, for evacuees living in less-sanitary conditions, consider antibiotics to decrease carriage and transmission. A small number of cases of norovirus infections have been reported among evacuees. Symptoms are acute onset of vomiting and watery, nonbloody diarrhea which may lead to dehydration. The course is self-limiting and lasts 1–3 days.
Skin and soft tissue infections	<i>Staphylococcus</i> including methicillin-resistant <i>Staphylococcus</i> <i>Streptococcus</i> Lice Scabies Cellulitis with wound infections	Methicillin-resistant <i>Staphylococcus</i> may be present in the community and may spread easily due to crowding and poor hygiene. Sensitivity testing should be performed.
Respiratory infections	<i>Mycoplasma</i>  <i>Pneumococcus</i> <i>Pertussis</i> <i>Influenza</i>  <i>Tuberculosis</i>	<i>Mycoplasma</i> has great potential for epidemic spread in crowded conditions. Consider <i>Pertussis</i> in adults with persistent cough; immunity from childhood DPT vaccinations wanes in adult years. CDC has not yet revised its influenza immunization guidelines but may need to change them for evacuees. CDC has no recommendations for nontargeted skin testing at this point.
Ophthalmic infections	Bacterial conjunctivitis Viral conjunctivitis	Viral conjunctivitis can last several weeks and lead to subconjunctival hemorrhage. It is highly contagious.
Neurological infections	West Nile encephalitis  <i>Meningococcal meningitis</i>	West Nile cases may increase as a result of increasing mosquito population due to standing water. This will take 3–4 weeks to happen; no increase has been noted yet. No cases have been reported yet but if a case occurs in a crowded population, vaccination may be recommended.
Multisystem infections	<i>Leptospira</i>	Contracted by exposure to water contaminated with animal urine. Symptoms develop 2 days to 4 weeks after exposure.